

# Application And Permit For Tourist Oriented Directional Signs (TODS) Along Primary And Secondary Highways

Idaho Transportation Department



For new applications, an application fee of \$100.00 is required at time of application to defray the administrative costs related to processing this application. Once the permit is approved and the required signing is determined, the applicant must prepay for the cost of sign manufacturing in accordance with the current fees as listed in the Department policy for *Tourist Oriented Directional Signs (TODS) Along Primary and Secondary Highways*. All fees are non-refundable.

☐ New Application/New Ownership

☐ Change(s) to Existing Application: ☐ Sign Layout ☐ Symbols ☐ Services ☐ Number or Location of Signs

## For Department Use Only

Application Number  <div style="display: flex; justify-content: space-between; font-size: small;"> <span>____ - ____</span> <span>____ - ____</span> <span>____ - ____</span> </div> <div style="display: flex; justify-content: space-between; font-size: x-small;"> <span>Year</span> <span>District</span> <span>Sequence</span> </div>		Date Application Received	Amount Received	Receipt/Check Number
Route Number	Segment Code	Milepost of Access Road	Name of Access Road	

Trailblazers Required <input type="checkbox"/> Yes <input type="checkbox"/> No	Number	Trailblazers Installed and Maintained By
Trailblazer Location(s) (Road/Street/MP of each to nearest ¼ mile)		

## Completed By Applicant – Please Print Legibly or Type

Business/Attraction Name	Business Phone Number	Fax Number
Business Type <input type="checkbox"/> Gas <input type="checkbox"/> Food <input type="checkbox"/> Lodging <input type="checkbox"/> Camping <input type="checkbox"/> Other <small>(Specify)</small> _____		

Operating Schedule	Hours Per Day	Days Per Week	Months Per Year	If Seasonal, Show Date Open From: _____ To: _____
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Located Outside City Limits <input type="checkbox"/> Yes <input type="checkbox"/> No	Distance From Nearest Town (Miles)	Direction From Town (Include Map or Brochure With Map) <input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West
Distance Off State Highway (Miles) <b>Note: Gas must be located a maximum of 3 miles off state highway, others a maximum of 15 miles</b>		
Advertising signs visible from state highway within 5 miles of facility <input type="checkbox"/> Yes <input type="checkbox"/> No	Facility visible from the state highway <input type="checkbox"/> Yes <input type="checkbox"/> No	

## Business Address

Name of Owner			Phone Number
Address	City	State	Zip
Authorized Operator/Contact Name			Phone Number
Billing Address (If different from above)	City	State	Zip

Please return completed application to: \_\_\_\_\_  
 \_\_\_\_\_

**Main TODS Sign (72")**

- ☐ 12" One line of text  
☐ 24" Two lines of text  
☐ 30" Three lines of text  
☐ Hinged

Number Required \_\_\_\_\_

**Advance TODS Sign (60")**

- ☐ 12" One line of text  
☐ 24" Two lines of text  
☐ 30" Three lines of text  
☐ Hinged

Number Required \_\_\_\_\_

**Service Symbols** - Symbols are optional. If desired, check up to four (4) symbols.

- |  |                                     |
|--|-------------------------------------|
| <input type="checkbox"/> Gas                   | <input type="checkbox"/> Food       |
| <input type="checkbox"/> Lodging               | <input type="checkbox"/> RV/Camping |
| <input type="checkbox"/> Tent/Camping          | <input type="checkbox"/> Fishing    |
| <input type="checkbox"/> Boating               | <input type="checkbox"/> Swimming   |
| <input type="checkbox"/> Other (specify) _____ |                                     |

**Sign Costs**

Number of Main TODS signs	_____	@	\$	each	=	\$
Number of Advance TODS signs	_____	@	\$	each	=	\$
Number of Symbols	_____	@	\$ 10	each	=	\$
<b>Total Cost (Sign fees collected after Headquarters' approval)</b>						<b>\$</b>

**Sign Location (First Approach)**

Route Number
Direction of Traffic
Milepost of Sign Location (completed by the Department)

**Sign Layout**


**Sign Location (Second Approach)**

Route Number
Direction of Traffic
Milepost of Sign Location (completed by the Department)

**Sign Layout**


**Statements**

I, the undersigned, hereby agree that upon approval of this application and prior to sign fabrication and installation that I will pay to the Idaho Transportation Department the sum of \$ \_\_\_\_\_ for signs. I also agree to conform to all applicable laws concerning the provision of public accommodations without regard to race, religion, color, age, sex, national origin, lifestyle, handicap access or membership and laws concerning the licensing and approval of service facilities.

Owner/Authorized Operator's Signature	Title	Date
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**District Recommendation**

<input type="checkbox"/> Approve <input type="checkbox"/> Deny		
Signature	Title	Date

**Headquarters**

<input type="checkbox"/> Approve <input type="checkbox"/> Deny		
Signature	Title	Date

Distribution (after review is completed): Completed Original – Permittee  
Copies To – HQ Traffic, District Office, Financial Services